## UNIUMAL,



## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470

TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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298 AHF

STATE LITTURES COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

DADTI LODDING	(Type or Print	Clearly)		
PART I LOBBYIST				
NAME (Last)	(First)	(Middle)	TELEPHONE	
Kaneko	William	M.	524-1800	
MAILING ADDRESS (Street)			FAX	
1001 Bishop Street ASB 1800			524-4591	
(City)	(State)	(Zip Code)		
Honolulu	Hawaii	96813		
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
Alston Hunt Floyd & Ing			524-1800	
MAILING ADDRESS (Street)			FAX	
1001 Bishop Street ASB 1800			524-4591	
(City)	(State)	(Zip Code)		
Honolulu	Hawaii		96813	

PART II ORGANIZATIO	N		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Alston Hunt Floyd & Ing  MAILING ADDRESS (Street) 1001 Bishop Street ASB 1800		TELEPHONE 524-1800 FAX 524-4591	
Honolulu	Hawaii		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
William M. Kaneko		524-1800	
MAILING ADDRESS (Street)		FAX	
1001 Bishop Street ASB 1800		524-4591	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

PART III DESCRIPTION	I OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBBY	<b>.</b>		
☐ Agriculture	Z Education	Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections			
PART IV CERTIFICATION					
	ON OF LOBBYIST				
Thereby certily that the	$\epsilon$ information furnished above	e is, to the best of my knowledg	ge, correct and complete.		
- / Vine	und Sum	$\mathcal{A}$	3/6/07		
	(Signature of Lobbyist)		(Date)		
			(= 5.1.)		
PART V AUTHORIZATION	ON TO LOBBY				
	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Paul Alston	President & Director				
NAME OF ORGANIZATION (if ap	oplicable)				
A	,		I TELEPHONE		
Alston Hunt Floyd & Ing	,		524-1800		
Alston Hunt Floyd & Ing MAILING ADDRESS (Street)			524-1800		
MAILING ADDRESS (Street)		(7	524-1800 FAX 524-4591		
MAILING ADDRESS (Street)  1001 Bishop Street ASB  (City)  Honolulu	1800 (State) Hawaii	9	524-1800 FAX 524-4591 Cip Code) 6813		
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